

FRIENDLY VILLAGE

900 BOYCE DR

RHINELANDER

54501

Phone: (715) 365-6832

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 139

Total Licensed Bed Capacity (12/31/04): 150

Number of Residents on 12/31/04: 128

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 129

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		36.7	
Supp. Home Care-Personal Care	No					1 - 4 Years		43.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.8	Under 65	10.9	More Than 4 Years		19.5	
Day Services	No	Mental Illness (Org./Psy)	28.1	65 - 74	14.1				
Respite Care	No	Mental Illness (Other)	7.0	75 - 84	30.5				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	36.7	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.8	95 & Over	7.8	Full-Time Equivalent			
Congregate Meals	No	Cancer	5.5			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	2.3		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	19.5	65 & Over	89.1				
Transportation	No	Cerebrovascular	7.8			RNs		10.2	
Referral Service	No	Diabetes	5.5	Gender	%	LPNs		10.9	
Other Services	No	Respiratory	3.1			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	19.5	Male	31.3	Aides, & Orderlies			
Mentally Ill	No			Female	68.8				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	3	3.0	146	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	2.3	
Skilled Care	15	100.0	329	94	94.9	126	0	0.0	0	14	100.0	180	0	0.0	0	0	0.0	0	123	96.1	
Intermediate	---	---	---	2	2.0	106	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.6	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	15	100.0		99	100.0		0	0.0		14	100.0		0	0.0		0	0.0		128	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	10.2	Bathing	3.1	63.3	33.6	128
Private Home/With Home Health	0.0	Dressing	12.5	68.0	19.5	128
Other Nursing Homes	4.1	Transferring	28.9	54.7	16.4	128
Acute Care Hospitals	85.2	Toilet Use	18.8	55.5	25.8	128
Psych. Hosp.-MR/DD Facilities	0.0	Eating	57.0	33.6	9.4	128
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.4	Continence		%	Special Treatments	%
Total Number of Admissions	244	Indwelling Or External Catheter	6.3	Receiving Respiratory Care		15.6
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	46.9	Receiving Tracheostomy Care		1.6
Private Home/No Home Health	29.1	Occ/Freq. Incontinent of Bowel	33.6	Receiving Suctioning		0.0
Private Home/With Home Health	28.3			Receiving Ostomy Care		4.7
Other Nursing Homes	6.1	Mobility		Receiving Tube Feeding		4.7
Acute Care Hospitals	14.3	Physically Restrained	1.6	Receiving Mechanically Altered Diets		28.1
Psych. Hosp.-MR/DD Facilities	0.0			Other Resident Characteristics		
Rehabilitation Hospitals	0.0	Skin Care		Have Advance Directives		84.4
Other Locations	7.8	With Pressure Sores	5.5	Medications		
Deaths	14.3	With Rashes	2.3	Receiving Psychoactive Drugs		60.9
Total Number of Discharges (Including Deaths)	244					

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	86.0	81.9	1.05	86.1	1.00	85.9	1.00	88.8	0.97
Current Residents from In-County	73.4	72.8	1.01	80.1	0.92	75.1	0.98	77.4	0.95
Admissions from In-County, Still Residing	13.1	18.7	0.70	19.9	0.66	20.5	0.64	19.4	0.68
Admissions/Average Daily Census	189.1	151.4	1.25	143.3	1.32	132.0	1.43	146.5	1.29
Discharges/Average Daily Census	189.1	151.2	1.25	144.8	1.31	131.4	1.44	148.0	1.28
Discharges To Private Residence/Average Daily Census	108.5	74.0	1.47	69.4	1.56	61.0	1.78	66.9	1.62
Residents Receiving Skilled Care	98.4	95.3	1.03	95.9	1.03	95.8	1.03	89.9	1.09
Residents Aged 65 and Older	89.1	94.3	0.94	93.5	0.95	93.2	0.96	87.9	1.01
Title 19 (Medicaid) Funded Residents	77.3	71.9	1.08	71.5	1.08	70.0	1.10	66.1	1.17
Private Pay Funded Residents	10.9	16.7	0.65	16.3	0.67	18.5	0.59	20.6	0.53
Developmentally Disabled Residents	0.8	0.6	1.25	0.7	1.17	0.6	1.36	6.0	0.13
Mentally Ill Residents	35.2	29.5	1.19	32.1	1.09	36.6	0.96	33.6	1.05
General Medical Service Residents	19.5	23.5	0.83	21.4	0.91	19.7	0.99	21.1	0.93
Impaired ADL (Mean)	48.8	46.4	1.05	48.7	1.00	47.6	1.03	49.4	0.99
Psychological Problems	60.9	54.5	1.12	55.2	1.10	57.1	1.07	57.7	1.06
Nursing Care Required (Mean)	7.8	7.4	1.06	7.9	0.99	7.3	1.07	7.4	1.05